· PATENT

Atty. Dkt. No. ROC920010279US1

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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AUG 0 6 2004

In re Application of:
    French et al.

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Group Art Unit: 2172

Serial No.: 10/028,842

Confirmation No.: 3305

Filed: December 20, 2001

For: Method and Apparatus for an
    Interactive Interface

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Examiner: Woo, I.

OFFICIAL

MAIL STOP AMENDMENT
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

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CERTIFICATE OF FAX
37 CFR 1.8

I hereby certify that this correspondence is being facsimile
transmitted to the Patent and Trademark Office to fax number
703/872-8306 to the attention of Examiner Isaac Woo on the
date below:

06 Aug 2004        [signature]
Date               Randol W. Read
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Dear Sir:

RESPONSE TO OFFICE ACTION DATED MAY 6, 2004

    In response to the Office Action dated May 6, 2004, having a shortened statutory period for response set to expire on August 6, 2004, please enter this response and reconsider the claims pending in the application for reasons discussed below. The Commissioner is hereby authorized to charge counsel's Deposit Account No. 09-0465, the fee of $36.00 for the addition of two (2) dependent claims and for any fees, including extension of time fees or excess claim fees, required to make this response timely and acceptable to the Office.

    Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper. Remarks/Arguments begin on page 7 of this paper.

11/22/2004 BHILLIAR 00000001 090465   10028842

283264_1

01 FC:1202   36.00 DA

	Application or Docket Number
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001	RCE 2001 0279 5-1

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	72	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	72 minus 20=	* 12
INDEPENDENT CLAIMS	3 minus 3 =	* 0
MULTIPLE DEPENDENT CLAIM PRESENT		☐

* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY TYPE ☐		OR	OTHER THAN SMALL ENTITY	
RATE	FEE		RATE	FEE
BASIC FEE	370.00	OR	BASIC FEE	740.00
X$ 9=		OR	X$18=	216
X42=		OR	X84=	
+140=		OR	+280=	
TOTAL		OR	TOTAL	956

CLAIMS AS AMENDED - PART II

8-6-04

AMENDMENT A

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	* 34	Minus	** 32	= 2
Independent	* 3	Minus	*** 3	= —
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				☐

SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
RATE	ADDI-TIONAL FEE		RATE	ADDI-TIONAL FEE
X$ 9=		OR	X$18=	$36
X42=		OR	X84=	
+140=		OR	+280=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	$36

AMENDMENT B

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	*	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				☐

RATE	ADDI-TIONAL FEE		RATE	ADDI-TIONAL FEE
X$ 9=		OR	X$18=	
X42=		OR	X84=	
+140=		OR	+280=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT C

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	*	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				☐

RATE	ADDI-TIONAL FEE		RATE	ADDI-TIONAL FEE
X$ 9=		OR	X$18=	
X42=		OR	X84=	
+140=		OR	+280=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.